

PO Box 3198 Shallotte, NC 28459

www.atmc.net

June 20, 2017

Marlene H. Dortch, Secretary Federal Communications Commission Office of the Secretary 445 12th Street, SW Washington DC 20554

RE: WC Docket No. 14-58

2017 ETC Annual Report of Atlantic Telephone Membership Corporation

Study Area Code 230468

Dear Ms. Dortch:

Pursuant to sections 54.313 and 54.422 of the Commission's rules¹, Atlantic Telephone Membership Corporation ('ATMC") files the attached confidential version of the FCC Form 481 ETC annual reporting information and attachments. ATMC seeks confidential treatment under Protective Order for section 54.313(f)(2) financial information². The redacted version is being filed this date via the FCC's Electronic Comment Filing System.

Please direct any questions regarding the filing to me at 910-755-1782 or via email at lgraff@atmc.com.

Sincerely,

Laura Graff

Director of Regulatory and Finance

¹ 47 C.F.R. §§ 54.313, 54.422.

² Connect America Fund et al., WC Docket Nos. 10-90 and 14-58, Protective Order, DA 16-296 rel. March. 22, 2016 (Protective Order). 47 C.F.R. § 54.313(f)(2).

REDACTED - FOR PUBLIC INSPECTION

FCC For	m 481 - Carrier Annual Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	230468	
<015>	Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name: Person USAC should contact with questions about this data	Laura Graff	
<035>	Contact Telephone Number: Number of the person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address: Email of the person identified in data line <030>	lgraff@atmc.com	
	Form Type	54.313 and 54.422	

(200) Service Outage Reporting (Voice)	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Co	rudy Area Code										
<015>	Study Area Na	tudy Area Name					BERSHIP					
<020>	Program Year	Program Year										
<030>	Contact Name	Contact Name - Person USAC should contact regarding this data				Laura Graff						
<035>	Contact Telep	Contact Telephone Number - Number of person identified in data line <030>				> 9107551782 e	ext.					
<039>	Contact Email	Address - Ema	il Address of pe	erson identified	in data line <030	> lgraff@atmc.	.com					
<210>	For the prior calendar year, were there any reportable voice service of				e outages?	No						
<220>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h></h>

>	<a>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<c1></c1>	<c2></c2>	<d></d>	<e></e>	<f></f>	<g></g>	<h>></h>
	NORS Reference Number	Outage Start Date	Outage Start Time	Outage End Date	Outage End Time	Number of Customers Affected	Total Number of Customers	911 Facilities Affected (Yes / No)	Service Outage Description (Check all that apply)	Did This Outage Affect Multiple Study Areas (Yes / No)	Service Outage Resolution	Preventative Procedures
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	(300) Unfulfilled Service Request Data Collection Form FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 306					
			July 2013			
٠٥١٥٠	Chirdry Assas Carda	230468				
<010>	Study Area Code	ATLANTIC MEMBERSHIP				
<015>	Study Area Name					
<020>	Program Year	2018				
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff				
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.				
<039>	<039> Contact Email Address - Email Address of person identified in data line <030> lgraff@atmc.com					
<300> U	Infulfilled service request (voice)	0				
<310> [Detail on attempts (voice)					
	Name	e of Attached Document				
<320> Unfulfilled service request (broadband)		0				
<330> Detail on attempts (broadband)						
	N	lame of Attached Document				

(400) Number of Complaints per 1,000 customers	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 230468
<015>	Study Area Name ATLANTIC MEMBERSHIP
<020>	Program Year 2018
<030>	Contact Name - Person USAC should contact regarding this data Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030> 9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line lgraff@atmc.com <030>
<400>	Select from the drop-down list to indicate how you would like to report voice complaints (zero or greater) for voice telephony service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<410>	Complaints per 1000 customers for fixed voice 0.0
<420>	Complaints per 1000 customers for mobile voice
<430>	Select from the drop-down list to indicate how you would like to report end-user customer complaints (zero or greater) for broadband service in the prior calendar year for each service area in which you are designated an ETC for any facilities you own, operate, lease, or otherwise utilize.
<440>	Complaints per 1000 customers for fixed broadband 0.0
<450>	Complaints per 1000 customers for mobile broadband

•	mpliance With Service Quality Standards and Consumer Protection Rules lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	230468	
<015>	Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	
<500>	Certify compliance with applicable service quality standards and consumer pr	otection rules Yes	
		FCC Form 481-2017 USAC LN 510 S	ervice Quality Certification.pdf
<510>	Descriptive document for Service Quality Standards & Consumer Protection Re	ules Compliance	
<515>	Certify compliance with applicable minimum service standards		

Page 6

(600) I	Functionality in Emergency Situations		FCC Form 481
Data C	Collection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	230468	
<015>	Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	
<600>	Certify compliance regarding ability to function in emergency situations	Yes	
<610>	Descriptive document for Functionality in Emergency Situations	FCC Form 481-2017 USAC LN 610 F	Emergency Certification.pdf

(700) Price Offerings including Voice Rate Data Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013			
<010> Study Area Code	230468				
<015> Study Area Name	ATLANTIC MEMBERSHIP	ATLANTIC MEMBERSHIP			
<020> Program Year	2018	2018			
<030> Contact Name - Person USAC should contact regarding this d	ata Laura Graff				
<035> Contact Telephone Number - Number of person identified in	data line <030> 9107551782 ext.				
<039> Contact Email Address - Email Address of person identified in data line <030> lgraff@atmc.com					
<701> Residential Local Service Charge Effective Date <702> Single State-wide Residential Local Service Charge 23.	/2017 0				

<703>	<a1></a1>	<a2></a2>	<a3></a3>	<b1></b1>	<b2></b2>	<b3></b3>	<b4></b4>	<b5></b5>	<c></c>
	State	Freshause (U.F.C.)	CAC (CETC)	Data Toma	Residential Local	Chata Calbaniban Lina Chana	Chata Universal Comica Foo	Mandatory Extended Area	Tatal was line Bates and Face
-	State	Exchange (ILEC)	SAC (CETC)	Rate Type	Service Rate	State Subscriber Line Charge	State Universal Service Fee	Service Charge	Total per line Rates and Fees
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(710) Broadbrand Price Offerings	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code 2	30468
<015>	Study Area Name	ATLANTIC MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c></c>	<d1></d1>	<d2></d2>	<d3></d3>	<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rate and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service - Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select }
				- See attac	hed				
				worksheet -					

(800) Operating Companies	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013
	3417 2013

<010>	Study Area Code		230468
<015>	Study Area Name		ATLANTIC MEMBERSHIP
<020>	Program Year		2018
<030>	Contact Name - Person U	JSAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Numb	ber - Number of person identified in data line <030>	9107551782 ext.
<039>	Contact Email Address - E	Email Address of person identified in data line <030>	lgraff@atmc.com
<810>	Reporting Carrier	Atlantic Telephone Membership Corporation	
<811>	Holding Company	Atlantic Telephone Membership Corporation	
<812>	Operating Company	Atlantic Telephone Membership Corporation	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
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(900) Tri	bal Lands Reporting		FCC Form 481
Data Collection Form			OMB Control No. 3060-0986/OMB Control No. 3060-0819
			July 2013
101.05	Christia Augus Code	230468	
<010> <015>	Study Area Code Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	
<900>	Does the filing entity offer tribal land services? (Y/N)	No	
<910>	Tribal Land(s) on which ETC Serves		
<920>	Tribal Government Engagement Obligation	Name of Attached I	Document
to confi	company serves Tribal lands, please select (Yes,No, NA) for each these boxes rm the status described on the attached PDF, on line 920, strates coordination with the Tribal government pursuant to 3(a)(9) includes:	Select Yes or No or Not Applicable	
<921> <922>	Needs assessment and deployment planning with a focus on Tribal community anchor institutions. Feasibility and sustainability planning;		
<923>	Marketing services in a culturally sensitive manner;		
<924>	Compliance with Rights of way processes		
<925>	Compliance with Land Use permitting requirements		
<926>	Compliance with Facilities Siting rules		
	Compliance with Environmental Review processes		
<927>			
<927>	Compliance with Cultural Preservation review processes		

-	oice and Broadband Service Rate Comparability		FCC Form 481
Data Coll	ection Form		OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code		230468
<015>	Study Area Name		ATLANTIC MEMBERSHIP
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <	030>	9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line <	030>	lgraff@atmc.com
<1000>	Voice services rate comparability certification	Yes	s
<1010>	Attach detailed description for voice services rate comparability compliance		
			Name of Attached Document
<1020>	Broadband comparability certification		s - Pricing is no more than the most recent applicable benchmark announced by wireline Competition Bureau
<1030>	Attach detailed description for broadband comparability compliance		
			Name of Attached Document

(1100) No Terrestrial Backhaul Reporting Data Collection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0 July 2013	
<010>	,	230468	
<015> <020>	Study Area Name Program Year	ATLANTIC MEMBERSHIP 2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	
<1100>	Certify whether terrestrial backhaul options exist (Y/N)	Yes	
<1130>	Please select the appropriate response (Yes, No, Not Applicable) to confirm the reporting carrier offers broadband service of at least 1 Mbps downstream and 256 upstream within the supported area pursuant to § 54.313(g).	kbps	

(1200) Terms and Condition for Lifeline Customers	FCC Form 481
Lifeline	OMB Control No. 3060-0986/OMB Control No. 3060-0819
Data Collection Form	July 2013
<010> Study Area Code	230468
<015> Study Area Name	ATLANTIC MEMBERSHIP
<020> Program Year	2018
<030> Contact Name - Person USAC should contact regarding this data	Laura Graff
<035> Contact Telephone Number - Number of person identified in data line <030	> 9107551782 ext.
<039> Contact Email Address - Email Address of person identified in data line <030]> lgraff@atmc.com
<1210> Terms & Conditions of Voice Telephony Lifeline Plans	Name of Attached Document
<1220> Link to Public Website HTTP	www.atmc.com
"Please check these boxes below to confirm that the attached document(s), on line 1210, or the website listed, on line 1220, contains the required information pursuant to § 54.422(a)(2) annual reporting for ETCs receiving low-income support, carriers must annually report:	
<1221> Information describing the terms and conditions of any voice telephony service plans offered to Lifeline subscribers,	
<1222> Details on the number of minutes provided as part of the plan,	
<1223> Additional charges for toll calls, and rates for each such plan.	

Data Coll	ice Cap Carrier Additional Documentation ection Form Rate-of-Return Carriers affiliated with Price Cap Local Exchange Carriers		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	230468	
<015>	Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	

Select the appropriate responses below (Yes, No, Not Applicable) to note compliance as a recipient of Incremental High Cost support, High Cost support to offset access charge reductions, and Connect America Phase II support as set forth in 47 CFR § 54.313(b),(c),(d),(e). The information reported on this form and in the documents attached below is accurate.

Incremental Connect America Phase I reporting

<2011>	3rd Year Certification 47 CFR §54.313(b)(1)(ii) - Note that for the July 2017 certification, this applies to Round 2 recipients of Incremental Support.		
<2022>	Recipient certifies, representing year three after filing a notice of acceptance of funding pursuant to 54.312(c), that the locations in question are not receiving support under the Broadband Initiatives Program or the Broadband Technology Opportunities Program for projects that will provide broadband with speeds of at least 4		
<2023>	Mbps/1Mbps - 54.313(b)(2)(i). Round 2 recipients only. The attachment on line 2024 includes a statement of the total amount of capital funding expended in the previous year in meeting Connect America Phase I deployment obligations, accompanied by a list of census blocks indicating where funding was spent. This covers year three - 54.313(b)(2)(ii). Round 2 recipients only.		
<2024A>	Round 2 Recipient of Incremental Support?		
<2024B>	Attach list of census blocks indicating where funding was spent in year three - 54.313(b)(2)(ii). Round 2 recipients only.	Name of Attached Document Listing Required Information	
<2025A>	Round 2 Recipient of Incremental Support?		
<2025B>	Attach geocoded Information for Phase I milestone reports (Round 2 for year three) - Connect America Fund , WC Docket 10-90, Report and Order, FCC 13-73, paragraph 35 (May 22, 2013).	Name of Attached Document Listing Required Information	
<2015>	2016 and future Frozen Support Certification 47 CFR § 54.313(c)(4)		

Data Collection Fo	Carrier Additional Documentation orm -Return Carriers affiliated with Price Cap Local Exchange Carriers	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013		
Price Cap <2016>	p Carrier Connect America ICC Support {47 CFR § 54.313(d)} Certification support used to build broadband America Phase II Reporting {47 CFR § 54.313(e)}			
<2017A>	Connect America Fund Phase II recipient?			
<2017C>	Total amount of Phase II support, if any, the price cap carrier used for capital expenditures in 2016.			
<2018>	Attach the number, names, and addresses of community anchor institutions to which the carrier newly began providing access to broadband service in the preceding calendar year - 54.313(e)(1)(ii)(A)	Name of Attached Document Listing Required Information		
<2019>	Recipient certifies that it bid on category one telecommunications and Internet access services in response to all FCC Form 470 postings seeking broadband service that meets the connectivity targets for the schools and libraries universal service support program for eligible schools and libraries located within any area in a census block where the carrier is receiving Phase II model-based support, and that such bids were at rates reasonably comparable to rates charged to eligible schools and libraries in urban areas for comparable offerings - 54.313(e)(1)(ii)(C)			

(3005) Rate Of Return Carrier Additional Documentation	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	230468
<015>	Study Area Name	ATLANTIC MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com

Select from the drop down menu or check the boxes below to note compliance with 54.313(f)(1). Privately held carriers must ensure compliance with the financial reporting requirements set forth in 47 CFR 54.313(f)(2). I further certify that the information reported on this form and in the documents attached below is accurate.

(3009)	Progress Report on 5 Year Plan Carrier certifies to 54.313(f)(1)(iii)				
			Yes - At	tach Certific	ation
(3010A)	Certification of Public Interest Obligations {47 CFR § 54.313(f)(1)(i)}				FCC Form 481-2017 USAC LN 3010 Milestone Certification.pdf
(3010B)	Please Provide Attachment	Name of Attached D	Oocument Lis	ting Required	ceretification, par
(3012A)	Community Anchor Institutions {47 CFR § 54.313(f)(1)(ii)}	Yes - Attach New Co	ommunity Ar	chors	FCC Form 481-2017 USAC LN 3012 Anchor Inst.xlsm
(3012B)	Please Provide Attachment	Name of Attached D	Oocument Lis	ting Required	FEC FORM 401-2017 OBAC IN 3012 ARCHOT THEC.XISM
(3013)	Is your company a Privately Held ROR Carrier {47 CFR § 54.313(f)(2)}	(Yes/No)	O	0	
(3014)	If yes, does your company file the RUS annual report	(Yes/No)	\odot	0	
(0047)	Please check these boxes to confirm that the attached PDF, on line 3017, contains the required information pursuant to § 54.313(f)(2) compliance requires:		Γ-		
(3015)	Electronic copy of their annual RUS reports (Operating Report for Telecommunications Borrowers)		L	<u>'</u>	
(3016)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows		L	V	FCC Form 481-2017 USAC LN 3017 RUS Report.pdf
(3017)	If the response is yes on line 3014, attach your company's RUS annual report and all required documentation	Name of Attached D Information	Oocument Lis	ting Required	
(3018)	If the response is no on line 3014, is your company audited? If the response is yes on line 3018, please check the boxes below to confirm your submission on line	(Yes/No)	0	0	
(3019)	3026 pursuant to § 54.313(f)(2), contains: Either a copy of their audited financial statement; or (2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3020)	Document(s) for Balance Sheet, Income Statement and Statement of Cash Flows				
(3021)	Management letter and/or audit opinion issued by the independent certified public accountant that performed the company's financial audit. If the response is no on line 3018, please check the boxes below to confirm your submission on line 3026 pursuant to § 54.313(f)(2), contains:				
(3022)	Copy of their financial statement which has been subject to review by an independent certified public accountant; or 2) a financial report in a format comparable to RUS Operating Report for Telecommunications Borrowers				
(3023)	Underlying information subjected to a review by an independent certified public accountant				
(3024)	Underlying information subjected to an officer certification.				
(3025)	Document(s) with Balance Sheet, Income Statement and Statement of Cash Flows				
(3026)	Attach the worksheet listing required information	Name of Attached D Information	Oocument Lis	ting Required	

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3005) Rate Of Return Carrier Additional Documentation (Continued) Data Collection Form	
(3005) Rate Of Return Carrier Additional Documentation (Continued) Data Collection Form	

230468	ATLANTIC MEMBERSHIP	2018	Laura Graff)> 9107551782 ext.	0> lgraff@atmc.com
<010> Study Area Code 230	<015> Study Area Name ATL		<030> Contact Name - Person USAC should contact regarding this data Lau	<035> Contact Telephone Number - Number of person identified in data line <030> 9107551782 ext.	<039> Contact Email Address - Email Address of person identified in data line <030> 1qraff@atmc.com

Financial Data Summary

(3027) Revenue

(3028) Operating Expenses

(3029) Net Income

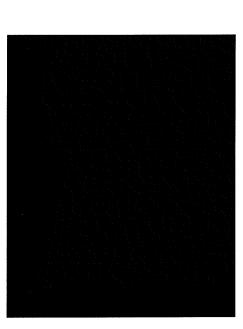
(3030) Telephone Plant In Service(TPIS)

(3031) Total Assets

(3032) Total Debt

(3033) Total Equity

(3034) Dividends



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(4005) Rural Broadband Experiment Additional Documentation Data Collection Form	FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	230468
<015>	Study Area Name	ATLANTIC MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Number - Number of person identified in data li	ne <030> 9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data li	ine <030> lgraff@atmc.com

4005 Rural Broadband Experiment

Authorized Rural Broadband Experiment (RBE) recipients must address the certification for public interest obligations, provide a list of newly served community anchor institutions, and provide a list of locations where broadband has been deployed.

Public Interest Obligations – FCC 14-98 (paragraphs 26-29, 78)

Please address Line 4001 regarding compliance with the Commission's public interest obligations. All RBE participants must provide a response to Line 4001.

4001. Recipient certifies that it is offering broadband to the identified locations meeting the requisite public interest obligations consistent with the category for which they were selected, including broadband speed, latency, usage capacity, and rates that are reasonably comparable to rates for comparable offerings in urban areas?

Community Anchor Institutions – FCC 14-98 (paragraph 79)

4003a. RBE participants must provide the number, names, and addresses of community anchor institutions to which they newly deployed broadband service in the preceding calendar year. On this line, please respond (yes – attach new community anchors, no – no new anchors) to indicate whether this list will be provided.

If yes to 4003A, please provide a response for 4003B.

speed and data usage allowances available in the

relevant geographic area.

4003b . Provide the number, names and addresses of community anchor institutions to which the recipient newly began providing access to broadband service in the preceding calendar year.	Name of Attached Document Listing Required Information	
Broadband Deployment Locations – FCC 14-98 (par	agraph 80)	
4004a . Attach a list of geocoded locations to which broadband has been deployed as of the June 1st immediately preceding the July 1st filing deadline for the FCC Form 481.	Name of Attached Document Listing Required Information	
4004b . Attach evidence demonstrating that the recipient is meeting the relevant public service obligations for the identified locations. Materials must at least detail the pricing, offered broadband	Name of Attached Document Listing Required Information	

Certification - Reporting Carrier	FCC Form 481
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819
	July 2013

<010>	Study Area Code	230468
<015>	Study Area Name	ATLANTIC MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com

TO BE COMPLETED BY THE REPORTING CARRIER, IF THE REPORTING CARRIER IS FILING ANNUAL REPORTING ON ITS OWN BEHALF:

Certification of Officer as to the Accuracy of the Data Reported for the Annual Reporting for CAF or LI Recipients

I certify that I am an officer of the reporting carrier; my responsibilities include ensuring the accuracy of the annual reporting requirements for universal service support recipients; and, to the best of my knowledge, the information reported on this form and in any attachments is accurate.

Name of Reporting Carrier: ATLANTIC MEMBERSHIP

Signature of Authorized Officer: CERTIFIED ONLINE Date 06/16/2017

Printed name of Authorized Officer: $^{ ext{Kim}}$ Edwards

Title or position of Authorized Officer: Vice President, Accounting & Finance

Telephone number of Authorized Officer: 9107551785 ext.

Study Area Code of Reporting Carrier: 230468 Filing Due Date for this form: 07/03/2017

Persons willfully making false statements on this form can be punished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title 18 of the United States Code, 18 U.S.C. § 1001.

	tion - Agent / Carrier lection Form		FCC Form 481 OMB Control No. 3060-0986/OMB Control No. 3060-0819 July 2013
<010>	Study Area Code	230468	
<015>	Study Area Name	ATLANTIC MEMBERSHIP	
<020>	Program Year	2018	
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff	
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.	
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com	·

TO BE COMPLETED BY THE REPORTING CARRIER, IF AN AGENT IS FILING ANNUAL REPORTS ON THE CARRIER'S BEHALF:

Certification of Officer to Authorize	an Agent to File Annual Reports for CAF or LI Recipients on Behalf of Reporting Carrier
I certify that (Name of Agent) also certify that I am an officer of the reporting carrier; my resp agent; and, to the best of my knowledge, the reports and data	is authorized to submit the information reported on behalf of the reporting carrier. I nsibilities include ensuring the accuracy of the annual data reporting requirements provided to the authorized ovided to the authorized agent is accurate.
Name of Authorized Agent:	
Name of Reporting Carrier:	
Signature of Authorized Officer:	Date:
Printed name of Authorized Officer:	
Title or position of Authorized Officer:	
Telephone number of Authorized Officer:	
Study Area Code of Reporting Carrier:	Filing Due Date for this form:
, ,	ished by fine or forfeiture under the Communications Act of 1934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment er Title 18 of the United States Code, 18 U.S.C. § 1001.

TO BE COMPLETED BY THE AUTHORIZED AGENT:

	Certification of Age	nt Authorized to File Annual Reports for CAF or LI Recipien	its on Behalf of Reporting Carrier
,		uthorized to submit the annual reports for universal service support r he reporting carrier; and, to the best of my knowledge, the information	
Name	of Reporting Carrier:		
Name	of Authorized Agent Firm:		
Signat	ture of Authorized Agent or Employee of Agent:		Date:
Name	of Authorized Agent Employee:	<u> </u>	
Title o	r position of Authorized Agent or Employee of Ag	ent	
Teleph	none number of Authorized Agent or Employee o	Agent:	
Study	Area Code of Reporting Carrier:	Filing Due Date for this form:	
	Persons willfully making false statements on this f	orm can be punished by fine or forfeiture under the Communications Act of 19 18 of the United States Code, 18 U.S.C. § 1001.	934, 47 U.S.C. §§ 502, 503(b), or fine or imprisonment under Title

Attachments

Atlantic Telephone Membership Corporation's Demonstration of Complying with Applicable Service Quality Standards and Consumer Protection rules:

In establishing this certification in its 2005 ETC Order,¹ the FCC found that an ETC must make "a specific commitment to objective measures to protect consumers." ² The Commission found that for wireless ETCs, compliance with CTIA's Consumer Code for Wireless Service would satisfy this requirement" and that the sufficiency of other commitments would be considered on a case-by-case basis.³ In this context, the FCC stated, "to the extent a wireline or wireless ETC applicant is subject to consumer protection obligations under state law, compliance with such laws may meet our requirement."

Atlantic Telephone Membership Corporation ("Company") hereby certifies that it is complying with applicable service quality standards and consumer protection rules. The Company is subject to consumer protection obligations under state law. These obligations include, but are not limited to, the following: jurisdiction of the North Carolina Rural Electrification Authority under N.C. Gen. Stat, Chap 117, for customer complaints.

¹ Federal-State Joint Board on Universal Service, CC Docket No. 96-45, Report and Order, FCC 05-46 (rel. Mar. 17, 2005) ("2005 ETC Order").

² *Id.* at para. 28.

³ *Id.* The FCC noted that under the CTIA Consumer Code, wireless carriers agree to: "(1) disclose rates and terms of service to customers; (2) make available maps showing where service is generally available; (3) provide contract terms to customers and confirm changes in service; (4) allow a trial period for new service; (5) provide specific disclosures in advertising; (6) separately identify carrier charges from taxes on billing statements; (7) provide customers the right to terminate service for changes to contract terms; (8) provide ready access to customer service; (9) promptly respond to consumer inquiries and complaints received from government agencies; and (10) abide by policies for protection of consumer privacy." *Id.* at n. 71.

Atlantic Telephone Membership Corporation's

Demonstration of Ability to Function in Emergency Situations:

Atlantic Telephone Membership Corporation ("Company") hereby certifies that it is able to function in emergency situations as set forth in the Code of Federal Regulations, Title 47, Part 54, Subpart C, §54.202(a)(2)¹ and N.C. Gen. Stat. § 62A. The Company's network is designed to remain functional in emergency situations without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations as required by Section 54.202(a)(2). The Company can change call routing translations as needed to reroute traffic around damaged facilities. Changing call routing translations will also allow the Company to manage traffic spikes throughout its network, as emergency situations require.

Specifically, each central office building is supplied with standby generators and battery back-up that enable the central office to keep running until power is restored so long as fuel is available, or until system changes are made to reroute traffic. The Company has battery backup at all office locations and in its electronic equipment sites.

Section 54.202(a)(2) requires ETCs that are designated by the Commission to "demonstrate its ability to remain functional in emergency situations, including a demonstration that it has a reasonable amount of back-up power to ensure functionality without an external power source, is able to reroute traffic around damaged facilities, and is capable of managing traffic spikes resulting from emergency situations."

(710) Broadband Price Offerings Data Collection Form

FCC Form 481

OMB Control No. 3060-0986/OMB Control No. 3060-0819

July 2013

<010>	Study Area Code	230468
<015>	Study Area Name	ATLANTIC MEMBERSHIP
<020>	Program Year	2018
<030>	Contact Name - Person USAC should contact regarding this data	Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030>	9107551782 ext.
<039>	Contact Email Address - Email Address of person identified in data line <030>	lgraff@atmc.com

<711>	<a1></a1>	<a2></a2>	<b1></b1>	<b2></b2>	<c> <d1></d1></c>	<d2></d2>	<d3></d3>		<d4></d4>
	State	Exchange (ILEC)	Residential Rate	State Regulated Fees	Total Rates and Fees	Broadband Service - Download Speed (Mbps)	Broadband Service -Upload Speed (Mbps)	Usage Allowance (GB)	Usage Allowance Action Taken When Limit Reached {select}
	NC	ALL	49.95	0.0	49.95	6.0	0.512	999999	Other, No limit on usage allowance
	NC	ALL	56.95	0.0	56.95	15.0	3.0	999999	Other, No limit on usage allowance
	NC	ALL	66.95	0.0	66.95	50.0	5.0	999999	Other, No limit on usage allowance
	NC	ALL	74.95	0.0	74.95	100.0	20.0	999999	Other, No limit on usage allowance
	NC	ALL	66.95	0.0	66.95	150.0	25.0	999999	Other, No limit on usage allowance
	NC	ALL	85.95	0.0	85.95	200.0	20.0	999999	Other, No limit on usage allowance
	NC	ALL	74.95	0.0	74.95	400.0	40.0	999999	Other, No limit on usage allowance
	NC	ALL	85.95	0.0	85.95	1000.0	100.0	999999	Other, No limit on usage allowance

(800) Operating Companies	FCC Form 481		
Data Collection Form	OMB Control No. 3060-0986/OMB Control No. 3060-0819		
	July 2013		

<010>	Study Area Code		230468
<015>	Study Area Name		ATLANTIC MEMBERSHIP
<020>	Program Year		2018
<030>	Contact Name - Person USAC should contact regarding this data		Laura Graff
<035>	Contact Telephone Number - Number of person identified in data line <030>		9107551782 ext.
<039>	Contact Email Address -	Email Address of person identified in data line <030>	lgraff@atmc.com
<810>	Reporting Carrier	Atlantic Telephone Membership Corporation	
<811>	Holding Company	Atlantic Telephone Membership Corporation	
<812>	Operating Company	Atlantic Telephone Membership Corporation	

<813>	<a1></a1>	<a2></a2>	<a3></a3>
	Affiliates	SAC	Doing Business As Company or Brand Designation
=	Atlantic Seawinds Communications, LLC		ATMC
_	Atlantic Telecom Multimedia Consolidated, LLC		ATMC
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Atlantic Telephone Membership Corporation (SAC 230468)

Response to Line 3010 – Milestone Certification (47 CFR §54.313(f)(1)(i))

Atlantic Telephone Membership Corporation hereby certifies that throughout 2016, it took reasonable steps to provide upon reasonable request broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream, with latency suitable for real-time applications, including Voice over Internet Protocol, and usage capacity that is reasonably comparable to comparable offerings in urban areas and that requests for such service are met within a reasonable amount of time. If a request for broadband service at actual speeds of at least 10 Mbps downstream/1 Mbps upstream is unreasonable, and offering broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream is reasonable, Atlantic Telephone Membership Corporation offers broadband service at actual speeds of at least 4 Mbps downstream/1 Mbps upstream.

Template for Reporting Community Anchor Institutions (Lines 2018, 3012B, and 4003B)

Number	Name	Street Address	State	Zip
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REDACTED - FOR PUBLIC INSPECTION

ATLANTIC TELEPHONE MEMBERSHIP CORPORATION (SAC 230468)

ATTACHMENT - LINE 3017

ATTACHMENT REDACTED IN ENTIRETY